

California Historical Resources Information System

ACCESS AGREEMENT

Number: _____

I, the undersigned, have been granted access to historical resources information on file at the _____
_____ Information Center of the California Historical Resources Information System.

I understand that any CHRIS Confidential Information I receive shall not be disclosed to individuals who do not qualify for access to such information, as specified in Section III(A-E) of the CHRIS Information Center Rules of Operation Manual, or in publicly distributed documents without written consent of the Information Center Coordinator.

I agree to submit historical Resource Records and Reports based in part on the CHRIS information released under this Access Agreement to the Information Center within sixty (60) calendar days of completion.

I agree to pay for CHRIS services provided under this Access Agreement within sixty (60) calendar days of receipt of billing.

I understand that failure to comply with this Access Agreement shall be grounds for denial of access to CHRIS Information.

Print Name: _____ Date: _____

Signature: _____

Affiliation: _____

Address: _____ City/State/Zip: _____

Billing Address (if different from above): _____

Telephone: _____ Fax: _____ Email: _____

Purpose of Access: _____

Reference (project name or number, title of study, and street address if applicable): _____

County: _____ Township/Range/Section or UTM's: _____

USGS 7.5' Quad: _____